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| | PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | | | | | |
|--|---|--------------------|---|--|--|--|--|
| | In re Application of WIGREN | | | | | | |
| | Application Number 10/605,372 | | Filed 09/25/2003 | | | | |
| | For Thermal Barrier Coating And A Method | | | | | | |
| | Group Art Unit 1775 | Examiner MCNEIL | | | | | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | | | | | |
| The requested extension and appropriate (check time period desired): | e non-small-entity fee are as follows | | | | | | |
| One month (37 CFR 1.17(a) | (1)) | | \$ 120 | | | | |
| Two months (37 CFR 1.17(a | Two months (37 CFR 1.17(a)(2)) \$ | | | | | | |
| Three months (37 CFR 1.17 | Three months (37 CFR 1.17(a)(3)) | | | | | | |
| Four months (37 CFR 1.17(a | Five months (37 CFR 1.17(a)(4)) Five months (37 CFR 1.17(a)(5)) | | | | | | |
| Five months (37 CFR 1.17(a | a)(5)) | | \$ | | | | |
| Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ A check in the amount of the fee is enclosed. | | | | | | | |
| Payment by credit card. Form PT0 | Payment by credit card. Form PTO-2038 is attached. | | | | | | |
| • | The Commissioner has already been authorized to charge fees in this | | | | | | |
| | application to a Deposit Account. The Commissioner is hereby authorized to charge any fees which may be required, | | | | | | |
| | or credit any overpayment, to Deposit Account Number 141437 I have enclosed a duplicate copy of this sheet. | | | | | | |
| I am the applicant/inventor | | | | | | | |
| | assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | | | | | |
| • | attorney or agent of record. | | | | | | |
| _ _ | attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) | | | | | | |
| | m may become public. Credit card information and authoriza | | | | | | |
| 04/14/2006 | Flock | ull | | | | | |
| Date | Signa | ture | | | | | |
| 6 AKELECH1 00000044 10605372 | | W. Druc | · - · · · · · · · · · · · · · · · · · · | | | | |
| 120.00 OP | Typed | or printe | d name | | | | |
| NOTE: Signatures of all the inventors or assignees forms if more than one signature is required, see be | • | ve(s) are re | equired. Submit multiple | | | | |
| ☐ Total of 1 forms are submitted | i. | | | | | | |

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/17 (12-04v2) Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Date 04/14/2006

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|--|---------------------|--|-------------|------------------------|--|---------------------|--------------|-----------------|--|--|
| Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005 | | Complete if Known | | | | | | | | |
| | | Application Number 10/605,372 | | | | | | | | |
| | | Filing Date | 09 | 09/25/2003 | | | | | | |
| | | First Named Inv | entor W | WIGREN | | | | | | |
| A I's A slaine a see | | Con 27 CED 4 0 | 77 | Examiner Name | M | CNEIL | | | | |
| Applicant claims sma | ii entity status | . See 37 CFR 1.2 | 2.7 | Art Unit | 17 | 75 | | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 170 | | | | Attomey Docke | t No. 07 | 07589.0056.NPUS01 | | | | |
| METHOD OF PAYMENT (check all that apply) | | | | | | | | | | |
| Check ✓ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): | | | | | | | | | | |
| Deposit Account Deposit Account Number: 141437 Deposit Account Name: Novak Druce & Quigg, LLP | | | | | | | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | | | | | | |
| Charge fee(s) indicated below Charge fee(s) indicated below | | | | | | | | | | |
| | | (s) or underpayme | ents of fe | ·/·\ | | | | , | | |
| under 37 CF | R 1.16 and 1. | 17 | | | t any overp | • | : Did | | | |
| WARNING: Information on th information and authorization | | | it card int | ormation should h | ot be includ | ea on this i | orm. Providi | e credit card | | |
| FEE CALCULATION | | | | | ************************************** | | | | | |
| 1. BASIC FILING, SEA | RCH, AND | EXAMINATION | FEES | | | | | | | |
| · | FILING | FEES | | CH FEES | EXAMIN | IATION F | | | | |
| Application Type | Fee (\$) | Small Entity Fee (\$) | Fee (\$ | Small Entity Dec (\$) | Fee (\$) | Small Er Fee (\$ | | Fees Paid (\$) | | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | - | | | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | _ | | | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | _ | | | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | _ | | | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | _ | | | |
| 2. EXCESS CLAIM FE | | | Ū | v | - | ŭ | Sma | all Entity | | |
| Fee Description | | | | | | <u>Fee</u> | | <u>see (\$)</u> | | |
| Each claim over 20 | ` • | • | | | | 50 | | 25 100 | | |
| Each independent cl Multiple dependent | ` | including Reissi | ues) | | | 20 36 | | 180 | | |
| Total Claims | Extra Cla <u>ir</u> | ns <u>Fee (\$)</u> | Fee | Paid (\$) | | | | dent Claims | | |
| 21 - 20 or HP = | | | = | 50 | | | (\$) | Fee Paid (\$) | | |
| HP = highest number of tot | | or, if greater than 20. | | D : 1 (A) | | | | | | |
| Indep. Claims - 3 or HP = | Extra Clair | ns <u>Fee (\$)</u> | <u>ree</u> | Paid (\$) | | | | | | |
| HP = highest number of independent claims paid for, if greater than 3. | | | | | | | | | | |
| 3. APPLICATION SIZE FEE | | | | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer | | | | | | | | | | |
| listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 | | | | | | | | | | |
| sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) | | | | | | | | | | |
| 100 = / 50 = (round up to a whole number) x = | | | | | | | | | | |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$) | | | | | | | | | | |
| Other (e.g., late filing surcharge): Extension Fee (120) | | | | | | | | | | |
| SUBMITTED BY | | | | | | | | | | |
| | 104 440 | cl- | | Registration No. | 35 <u>4</u> 93 | T | elephone 20 | 2.659.0100 | | |
| | とくくと | | | (Attorney/Agent) | , ,,,, ,,, | | | 2.000.0100 | | |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Name (Print/Type) Tracy W. Druce